

SCC eFile
(6/10)

**2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

211524319

1.) CORPORATION NAME:

PCS Phosphate Company, Inc.

DUE DATE: **11/30/2011**

SCC ID NO: **F0419244**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1101 SKOKIE BLVD SUITE 400

CITY/ST/ZIP: NORTHBROOK, IL 60062-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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OFFICER

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DIRECTOR

NAME: WILLIAM J DOYLE
TITLE: CHAIRMAN
ADDRESS: 1101 SKOKIE BLVD SUITE 400
CITY/ST/ZIP/CO: NORTHBROOK, IL 60062-

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OFFICER

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DIRECTOR

NAME: BRENT HEIMANN
TITLE: PRESIDENT
ADDRESS: 1101 SKOKIE BLVD
SUITE 400
CITY/ST/ZIP/CO: NORTHBROOK, IL 60062-

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OFFICER

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DIRECTOR

NAME: LARRY O'BRIEN
TITLE: Dir,Corp.Credit
ADDRESS: 1101 SKOKIE BLVD
SUITE 400
CITY/ST/ZIP/CO: NORTHBROOK, IL 60062-

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OFFICER

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DIRECTOR

NAME: LEE KNAFELC
TITLE: V.P./H.R.
ADDRESS: 500, 122 FIRST AVE. SOUTH
CITY/ST/ZIP/CO: SASKATOON, SK S7K 7G3-, CANADA

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OFFICER

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DIRECTOR

NAME: CLARK HUFF
TITLE: VP/Capital&Tech
ADDRESS: 1101 SKOKIE BOULEVARD
SUITE 400
CITY/ST/ZIP/CO: NORTHBROOK, IL 60062-

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WAYNE R. BROWNLEE V.P.&Treasurer 500, 122 FIRST AVE. S. SASKATOON, SK S7K 7G3-, CANADA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARRYL STANN VP, Procurement 1101 SKOKIE BOULEVARD, SUITE 400 NORTHBROOK, IL 60062-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT KRAMER Dir.,US Tax 1101 SKOKIE BOULEVARD, SUITE 400 NORTHBROOK, IL 60062-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT KIRKPATRICK Asst. Secretary 500, 122 FIRST AVE. S. SASKATOON, SK S7K 7G3-, CANADA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH A PODWIKA V.P., Secretary 1101 SKOKIE BLVD STE 400 NORTHBROOK, IL 60062-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KARIN S TORAIN Asst. Secretary 1101 SKOKIE BLVD STE 400 NORTHBROOK, IL 60062-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
<u>/s/ KARIN S TORAIN</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>KARIN S TORAIN, Asst. Secretary</u> PRINTED NAME AND CORPORATE TITLE	<u>10/13/2011</u> DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			